# DAILY CURRENT AFFAIRS ANALYSIS

## 27 MARCH 2024

# 1 - ASHA Employees and Associated Issues:

# GS II

# Government Policies and Interventions

- **Context:**

- Accredited Social Health Activists' (ASHA) recent demonstration in Bengaluru highlights ongoing worries about their wages and working conditions, highlighting issues with India's rural healthcare system.

- **What Are the Duties of ASHA Employees? Who Are They?**

- In 2002, Chhattisgarh appointed women as Mitanins, or community health workers, marking the beginning of a groundbreaking paradigm shift in community healthcare.
- Mitanins acted as a link between local needs and distant health institutions, advocating on behalf of impoverished people.
- Motivated by Mitanins' success, the federal government started the ASHA programme in 2005–06 under the National Rural Health Mission. In 2013, the National Urban Health Mission was introduced, bringing the programme to cities.

- Trained to serve as a liaison between the public health system and the community, ASHA workers are chosen from within the village and answer to it.
- They are mostly rural women, between the ages of 25 and 45, who are preferably at least 10th grade literate.
- One ASHA typically exists for every 1000 individuals. Nevertheless, depending on workload, this ratio may be changed to one ASHA per habitation in tribal, hilly, and desert areas.

- **Principal Accountabilities:**

- When it comes to health-related requirements, they operate as the initial point of contact, particularly for women and children.
- They are rewarded for their efforts in building home toilets, promoting immunisation, and providing reproductive and child health services based on their performance.
- They offer advice on immunisation, contraception, breastfeeding, safe delivery, birth preparation, and the avoidance of common diseases.
- They make health services offered at Anganwadi, sub-centers, and primary health centres more accessible to the community.
- They serve as depots for necessities such as contraceptives, IFA pills, and ORS.

- **What Difficulties Do ASHA Employees Face?**

- Heavy Workload: Because of their wide range of responsibilities, ASHAs are frequently overburdened with a number of tasks that can occasionally become burdensome.
- They themselves continue to be vulnerable to non-communicable diseases, anaemia, and malnourishment.
- Insufficient Remuneration: ASHAs, who mostly depend on little honorarias, have financial difficulties made worse by late payments and out-of-pocket costs.
- Basic benefits like as medical aid, life insurance, maternity benefits, provident fund, pension, leave, and gratuity are not provided to them by social security.
- Inadequate Acknowledgment: The efforts made by ASHAs are not always appreciated or acknowledged, which can cause them to feel undervalued and frustrated.
- Absence of Supportive Infrastructure: ASHAs have difficulties because of insufficient infrastructure, such as restricted access to medical supplies, communication facilities, and modes of transportation. This makes it more difficult for them to perform their jobs well.
- prejudice on the Basis of Gender and Caste: Within the healthcare system, ASHAs—who are primarily women from underprivileged communities—face prejudice on the basis of both gender and caste.

- **The Way Ahead:**

- Formalise Employment Status: In order for ASHA employees to have a formalised employment status inside the healthcare system, they must move from voluntary posts.
- They would receive regular pay, employment security, and access to perks like paid time off and health insurance as a result.
- Investing in enhancing infrastructure, logistics, and supply chain management is crucial to guaranteeing that ASHA personnel have access to necessary supplies, equipment, and transportation.
- Acknowledgment and Incentives: putting in place official programmes for acknowledging the accomplishments and contributions of ASHA employees. These programmes could include performance-based bonuses, public recognition events, or certificates of appreciation.
- In the current healthcare system, they also need to be given the chance to grow in their careers and become Auxiliary Nurse Midwives (ANMs).

*Source → The Hindu*

# 2 - Modification of the Surrogacy Regulations:

# GS II

# Health related issues

- **Context:**

- The Surrogacy (Regulation) Rules, 2022, have been changed by the Indian government, permitting married couples to use a donor's egg or sperm in the event that one spouse has a medical issue.

- This nullified an earlier rule change that forbade the use of donor gametes and was made in March 2023.

- **Which are the Amended Surrogacy Rules' Principal Provisions?**

- Background: Couples with certain medical issues were not allowed to have biological children through surrogacy; instead, the rules were altered in March 2023 and only allowed the intended couple to use their own gametes.
- These limitations upset people and put impacted couples' rights to parenthood in jeopardy.
- A woman with Mayer-Rokitansky-Kuster-Hauser (MRKH) Syndrome, a hereditary condition that causes infertility, challenged it legally before the Supreme Court.
- The Supreme Court voiced doubts about the effectiveness of these laws, claiming that they went against the core goals of surrogacy.
- Recently Amended Provisions: If one spouse in the intended couple is certified by the District Medical Board to need donor gametes because of a medical issue, then surrogacy using donor gametes is permitted.
- This suggests that in cases where both partners have health concerns, couples are still unable to choose surrogacy.
- It requires that surrogate mothers who are divorced or widowed utilise their own eggs in addition to donor sperm.

- **What is a surrogate?**

- About: A woman, referred to as the surrogate mother, consents to bear and give birth to a child on behalf of another person or couple, referred to as the intended parents.

- **Categories:**

- Conventional Surrogacy: Conventional surrogacy entails fertilising the surrogate's egg with the intended father's sperm.
- The intended father and the surrogate mother are biologically linked to the child born when the surrogate brings the pregnancy to term.
- Gestational Surrogacy: In this type of surrogacy, the surrogate and the child are not biologically linked.
- In order for the surrogate to bring the pregnancy to term, an embryo made using the intended father's (or donor's) sperm and the biological mother's (or donor's) egg is inserted into her uterus.
- The Surrogacy Agreement:
- Altruistic surrogacy is the term used to describe a surrogacy contract in which the surrogate receives only payment for connected fees and medical expenses.
- In altruistic surrogacy, the surrogate's main goal is usually to assist another person or couple in realising their child-bearing ambition.
- Commercial surrogacy: This type of surrogacy entails a written contract in which the surrogate mother is paid in addition to being reimbursed for her medical bills and other pregnancy-related expenses.
- The exact details of the surrogacy agreement, the location, and the law may all have an impact on this remuneration.

- **What Other Rules Do Indian Laws Concerning Surrogacy?**

- Permissibility: As per the Surrogacy (Regulation) Act 2021, surrogacy is only allowed for charitable purposes or for couples who have a medical condition or confirmed infertility.
- It is expressly forbidden to use commercial surrogacy, including for sale or other forms of exploitation.
- Couples that meet the eligibility requirements must have been wed for a minimum of five years.
- The spouse must be between the ages of 26 and 55 for the wife and 25 to 50 for the husband.
- Save in the event of children with impairments or life-threatening conditions, the couple is not allowed to have any living children, whether biological, adopted, or through surrogacy.
- Requirements for a Surrogate Mother: The surrogate mother needs to be a couple's close relative.
- She needs to be a married mother of one or more children.
- She must be between the ages of 25 and 35, and she must have never previously served as a surrogate.
- Parental Status at Birth: The child is officially acknowledged as the intended couple's biological child at birth.

- In accordance with the guidelines of the Medical Termination of Pregnancy Act, the surrogate mother and the appropriate authorities must both give their approval for the foetus to be aborted.

*Source → The Hindu*

# 3 - Language Atlas of IGNCA:

# GS I

# Indian Culture

- **Context:**

- An independent organisation under the Ministry of Culture, the Indira Gandhi National Centre for Arts (IGNCA), is organising a language survey throughout India. The goal is to produce an extensive "Language Atlas" that will highlight the nation's linguistic variety.

- **How Diverse a Linguistic Landscape Is India?**

- **Archive of Past Census Data:**

- Sir George Abraham Grierson conducted the first and most thorough Linguistic Survey of India (LSI), which was published in 1928.
- 1,554 languages were reported as being spoken in India in the 1961 Census.
- In terms of language data, the 1961 Census was the most comprehensive. Even languages having a single speaker were represented in the records of this census.
- Since 1971, the Indian Census has excluded languages spoken by less than 10,000 people, meaning that 1.2 million people's native tongues remain unrecorded.
- Tribal populations are disproportionately affected by this exclusion since their languages are often missing from government documents.
- 22 languages specified in Schedule 8 of the Indian Constitution are currently recognised officially in India.
- 97% of people in the country speak one of these officially recognised languages, according to data from the 2011 Census.
- According to the 2011 Census, there are another 99 non-scheduled languages, and 37.8 million individuals claim one of these as their mother tongue.
- In India, there are 121 languages that at least 10,000 people speak.

- **India's multilingualism:**

- Being one of the world's most linguistically diverse nations, India provides Indians with a special chance to be multilingual, or able to communicate in more than one language.
- In India, around 25% of people speak two languages, and roughly 7% speak three, according to the 2011 Census.
- According to studies, young Indians speak more than one language, with around half of the urban population between the ages of 15 and 49 speaking two languages.

- **What Standout Features Does the Suggested Linguistic Survey Offer?**

- The main goal of the study is to count the number of languages and dialects that exist in India, including those that are extinct or in danger of going extinct.
- State and regional data collection is the goal, and audio recordings in every language spoken will be digitally archived.
- It also suggests archiving all spoken languages' audio records digitally.
- Along with different language communities, stakeholders in the survey include Ministries of Culture, Education, Tribal Affairs, and others.

- **Why is a Linguistic Survey Important?**

- **Safeguarding Cultural Legacy:**

- In order to preserve linguistic diversity and cultural legacy, linguistic surveys aid in the identification and documentation of languages, dialects, and scripts.

- **Formulation of Policy:**

- Linguistic survey data provides policymakers with information on the linguistic requirements of various communities, which aids in the creation of language-related policies in the areas of culture, education, and governance.

- **Planning for Education:**

- Understanding the languages used in various locales facilitates the creation of educational curricula that accommodate a range of linguistic origins and advance inclusive education.

- **Empowerment of Communities:**

- By identifying and valuing their languages, linguistic surveys support the socioeconomic and cultural well-being of linguistic minorities and marginalised communities.

- **Investigating and Recording:**

- For scholars, linguists, and anthropologists researching dialectology, language contact phenomena, and language evolution, linguistic surveys are an invaluable resource.

- **Encouragement of Bilingualism:**

- Linguistic surveys encourage multilingualism and a sense of pride in one's language and cultural identity by growing knowledge of the richness of linguistic diversity.

- **The Way Ahead:**

- Adopt laws that support teaching regional languages in addition to Hindi and English. To guarantee that pupils are fluent in both their native language and a language that is commonly spoken, support bilingual education.
- To guarantee that multilingualism and the preservation of regional languages are supported, review and update educational policies.
- Set guidelines for regional languages and assist in the documentation and preservation of endangered languages via digital archives, linguistic study, and oral history preservation.
- By means of community-driven language revitalization initiatives, enable linguistic communities to assume responsibility for their languages.

*Source → The Hindu*

# 4 - Private Schools Are Exempt from the RTE Quota Admissions:

# GS II

# Education related issues

- **Context:**

- Under specific circumstances, private unaided schools are exempt from the statutory 25% admission quota for underprivileged groups and weaker sections, according to a new gazette notification from the Maharashtra school education department.

- The Right Of Children To Free And Compulsory Education Act, 2009 (RTE Act) requires independent schools to guarantee that 25% of admitted Class 1 students are from a "weaker section and disadvantaged group in the neighbourhood." This requirement is found in section 12.1(C).

- With this action, Maharashtra follows Karnataka's 2018 rule and Kerala's 2011 regulations exempting private schools from RTE admissions. These regulations allow fee discount only in cases where there are no government or aided schools within a reasonable walking distance, which is fixed at one kilometre for Class 1 children.

- **What Does the New Rule Actually Say?**

- According to the Maharashtra Right of Children to Free and Compulsory Education Rules, 2013, the new rule forbids local authorities from designating private unaided schools for the 25% admission of disadvantaged groups and weaker sections if the government or aided schools—which get funding from the government—are located within a one-kilometer radius of that school.
- These private schools will no longer have to follow the 25% rule; instead, pupils in these locations will be admitted to government or aided schools first.
- According to the notification, private schools will be chosen for RTE admissions and paid for fees if there are no assisted schools in the area. A new list of required schools will then be established in accordance with this decision.

- **Why Did States Implement These Exemptions?**

- The state law minister of Karnataka said in 2018 that the primary goal of the RTE is to provide education to all pupils, pointing out that enrollment in government schools had been significantly decreased by the state's prior policy allowing parents to enrol their children in private schools close to government schools.
- A judge is now reviewing the 2018 gazette notification issued by the Karnataka government.
- As required by Section 12(2) of the RTE Act, which requires state governments to reimburse schools for per-child expenses or the fee amount, whichever is lower, private schools and teachers' organisations have observed that state governments frequently fail to reimburse fees for students admitted under this quota.

- **What Effects Does This Exemption Likely Have?**

- Experts have questioned whether the state has the right to change the central law, claiming that the notification is illegal and ought to be disregarded.
- The Maharashtra government's modification has drawn criticism for being unwarranted and highlighting how crucial Section 12(1)(C) is to the fight against educational inequity.

- **Arguments in Support:**

- The Maharashtra government has made it clear that the amendments made were to the rules drafted in 2011 and 2013, not the original statute, and that states are empowered under Section 38 of the RTE Act to create regulations for its implementation.

- Noting that section 6 encourages government schools in underserved areas and that section 12.1(C) is a temporary measure until such schools are constructed, the move does not violate the RTE Act.
- The new regulations have been well received by private unaided schools, who claim that they will result in more pupils attending public schools.

- The Maharashtra government's action raises questions about equality and children from marginalised households' access to high-quality education, even while it would lessen some of the financial constraints on private schools and possibly increase enrollment in government schools. It's still difficult to strike a balance between promoting private education and making sure everyone has access to an inclusive education.

*Source → The Hindu*